DEPARTMENT OF COMMERCE		. ,		APPRAISAL PERIOD		
Senior Executive Service	Yes	Yes No No FROM:		FROM:	TO:	
APPRAISAL RECORD (Point System)						
NAME (Last, First, MI)	BASE SALAR	Υ		TITLE		
BUREAU	OFFICE					
DATE ENTERED SES	DATE START	ED SES	S APPOINTMENT AT DOC	3		
SI	SUPERVISORS INITIAL RATING					
CRITICAL PERFORMANCE ELEMENTS			ELEM	MENT	SCORE	
(indicate weight in the column)		\	RAT (1 -			
1. Leadership/Management	3	0%				
2. Customer/Client Service Responsiveness	2	0%				
3.						
4.						
5.						
TOTAL	→ 10	00%				
SUMMARY RATING (Check One)						
OUTSTANDING COMMENDABLE FULLY S (460-500) (380-459) (290-379)	UCCESSFUL	. 🗆	MINIMALLY SATI (200-289)	ISFACTORY	UNSATISFACTORY ☐ (100-199)	
Employee's Signature:			Date:			
Supervisor's Signature:			Date:			
OPTIONAL HIGHER LEVEL REVIEW (at employee request)	attached					
Higher Level Review Recommendation on initial rating:						
☐ Concur with Supervisory Summary Rating ☐ Change	Summary Ra	ting to	o (specify):			
Higher Level Reviewer Signature :						
Title:			Da	ate:		

Concur with Supervisory Summary Rating Change Summary Rating to (specify): Bonus% Base Salary Increase to \$ Distinguished Rank Award SECRETARIAL OFFICER / OPERATING UNIT HEAD RECOMMENDATIONS
SECRETARIAL OFFICER / OPERATING UNIT HEAD RECOMMENDATIONS
☐ Concur with PRB Recommendations ☐ Change to (specify):
APPOINTING AUTHORITY RECOMMENDATIONS
(More than one block may apply) APPOINTING AUTHORITY SIGNATURE:
□ Bonus% □ D Rank Award
□ Base Salary Increase% □ M Rank Award